

Indiana School Corporation Health Insurance Compliance Report

Step-By-Step Instructions

IC 20-26-17 (HEA 1260-2011) requires school corporations to report information about the school's employee health plans to the State Personnel Department annually by **December 31**. The goal is to limit your school's share of the cost of healthcare coverage so that it does not exceed the State's cost by more than twelve percent (12%).

The below instructions to the form are to be used to fulfill this reporting obligation. The State of Indiana example can be found for your review once you have logged into the form. State Example, contains information about the State of Indiana Employee Health plans to be used as both an example and as the standard to compare school plans.


Definitions	
Plan	Sometimes referred to as an option. Each benefit offering with a unique deductible, co-pays or co-insurance or out of pocket maximum is considered a plan.
Informational Fee	The funding for a self-insured plan (similar to the premiums for a fully-insured plan).
Premium	The amount paid for health insurance coverage for a specific period of time.
Annual Employer Contribution	The amount the employer pays toward the total premium or informational fee.

HEA 1260 Compliance Timeline	
12/31/11	Schools file 1st report of their costs
2012	Employer's cost for plans beginning in 2012 should not exceed the State plan costs by 12%.
12/31/2012	Schools file 2nd report of their costs
2/14/2013	(or 45 days after renewal) those with employer costs exceeding the State's cost by greater than 12% submit plan to achieve compliance.
12/31/2014	Schools file 4th report of their costs
1/1/2015	(or end of school's current plan year) non-compliant school enrolls in the State plans
<p>If a school had a collective bargaining agreement in effect on 7/1/11 and its costs exceed the State's cost by more than 12%, then the school must become compliant when the collective bargaining agreement expires or when any provision of the agreement is reopened and changed; but, no earlier than the timeline above.</p>	



1. Log onto your **INSTEP** account using the User ID and Password provided in your initial email.
Link: <https://hr85.gmis.in.gov/psp/pa91prd/INDIANASCHOOLCOMPLIANCE1/ENTP/h/?tab=DEFAULT>
If you experience login trouble please contact benefitingschools@spd.in.gov



The image shows the INSTEP State Employee Portal login page. It features a large blue outline of the state of Indiana on the left. To the right of the map, the text "INSTEP" is written in a large, bold, blue font, followed by "State Employee Portal" in a smaller, blue font. Below this, there are two input fields: "User ID:" and "Password:". Below the password field is a "Sign In" button.

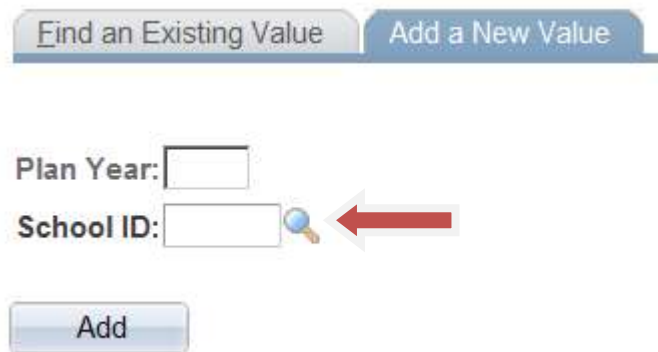
2. Click the  **Links** button on the left-side of the home screen

3.

Top		Customize Find View All
	Title	Description
	School Corp Compliance Report	Click here to complete your school's compliance report.
	School Corp Sample Report	Sample Compliance Report

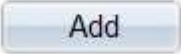

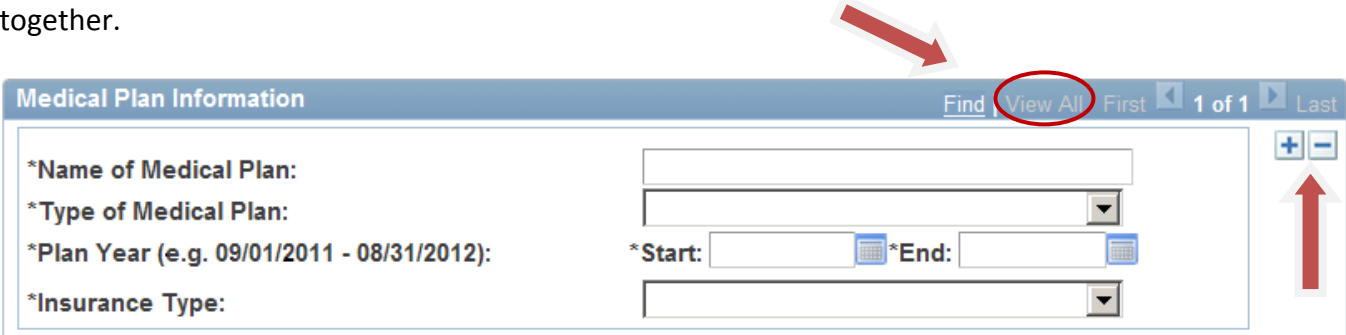
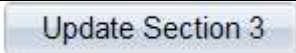
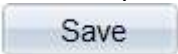
To view a sample report click *School Corp Sample Report*

4. Click on *School Corp Compliance Report*
5. Click on the magnifying glass to locate your School ID



The image shows a search form for finding a School ID. At the top, there are two buttons: "Find an Existing Value" and "Add a New Value". Below these, there are two input fields: "Plan Year:" and "School ID:". To the right of the "School ID:" field is a magnifying glass icon. A red arrow points to the magnifying glass icon. Below the input fields is an "Add" button.

6. Select your School Corporation

7.	Click the  button. Once clicked, you will then be directed to the form.
8.	<p><u>Section 1: Organizational Information</u></p> <p>Verify that your school corporation information is correct. If not, please provide the correct information to benefitingschools@spd.in.gov</p> <p>Please fill in your contact name, email address and phone number and click </p>
9.	<p><u>Section 2: Medical Plan Information</u></p> <p>Please complete for each medical or prescription drug plan offered in the current plan year (in effect on December 31, 2013). Additional rows can be added or removed by using the “+/-” buttons.</p> <p>If you have more than one medical plan you may click <u>View All</u> to see all of your medical plans listed together.</p>  <ul style="list-style-type: none"> • For each plan, identify the name and type of medical plan offered. • Insert the plan year. Identify the first day of the plan year on or after December 31, 2012 and the last day of that same plan year. • For the purposes of this section enrollee means employee or board member receiving benefits (do not include the number of dependents or retirees). • The annual employer contribution is the amount the employer has or will contribute if an employee remains in the plan for an entire plan year (12 month period). Use year-to-date data to project annualized costs. • Total annual cost is calculated by multiplying the number of enrollees by the annual employer contribution.
10.	<p>When all plans are entered click </p> <p>This will save the data entered in Section 2 and carry the information to Section 3.</p>
11.	<p><u>Section 3: Summary</u></p> <ul style="list-style-type: none"> • Please answer all questions. Lines 7, 8, 11, and 12 will calculate based on your data provided earlier. • You may  your work and revisit the form to edit at any time. While you are working on the form your status at the bottom of the page will show as Pending • If you revisit the form at a later time and make changes to Section 2 you must click <i>Update Section 3</i>

	<p>for the information to update.</p> <div>Save and Submit</div> <ul style="list-style-type: none"> • NOTE: <u>Once you click</u> <u>your information is submitted and you cannot go back in and edit. Please be sure your information is correct before hitting submit.</u> • Once you have submitted your School's information you will receive an email confirmation • If you have submitted and later need to make a change please email benefitingschools@spd.in.gov
12.	Complete! Thank you for your response!